

[Nonprofit Organization Name]

[Address Line 1]
[City, State, ZIP]
[Phone Number] | [Email Address]
Tax ID: [EIN/Tax Exempt Number]

Donation Receipt

Donor Name:	[Donor Full Name]
Address:	[Donor Address]
Date of Donation:	[MM/DD/YYYY]
Donation Amount:	\$[Amount]
Payment Method:	[Cash/Check/Credit Card/Other]
Donation Description:	[e.g., General Fund, Project Name, In-kind Item]

Statement: No goods or services were provided in exchange for this donation unless otherwise noted. Please retain this receipt for your tax records. Your generosity helps support our ongoing mission.

Authorized by: _____ Date: _____